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# Registration of Opticians

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## REGISTRATION OF OPTICIANS.

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THE proposed legislation for the registration of opticians, if adopted, may make a considerable alteration in certain departments of ophthalmic practice as carried on to-day. It is to be hoped that Parliament, in the interests of the public, will strenuously set itself against any attempt to allow a person to practice an important branch of the medical craft on what may be called a bogus qualification. There is only one way in which a man can acquire sufficient knowledge to practice ophthalmology for the best advantage of the public, and that is by years of patient study; no one is competent for ophthalmic work who has not had a very extensive training in the profession of medicine generally. One indirect public advantage which registration would give is that it would prevent spectacle vendors who are wholly incompetent from advertising themselves as being fit craftsmen. Just the other day I came upon a patient who was wearing a spherical +4 D. glass and who had a myopia of 10 dioptres, yet these very glasses had been prescribed by an optician who has not even got any of the *quasi* diplomas, but who, notwithstanding, advertises himself extensively as an ophthalmic optician with a special knowledge of eye testing.

If a Bill passed by Parliament could put an end to this sort of thing it would not be without some benefit, but we question very much if any such legislation will be put on the statute book. However desirable it may be to prevent ignorant and incompetent persons from prescribing for so delicate an organ as the eye, still, on the other hand, the legislature is not likely to pass an Act which will prevent any man from selling a pair of spectacles.

The attitude which Ophthalmic Surgeons have taken up in opposing the proposed legislation is thoroughly proper. No man by a few months attendance at a course of instruction on very elementary optics can have a sufficient knowledge to treat ocular conditions with any degree of thoroughness, and surgeons naturally have a fear that should the Bill become law it would legalize a form of quackery which, as the instance just quoted above shows, is already rampant enough in our midst. Were the Bill to produce a set of men who would stand to the ophthalmic surgeon very much in the same relationship as the pharmaceutical chemist stands to the physician, then probably it would be beneficial, for it would mark out the men who had had a sufficient training to carry out instructions in a reliable manner from those who are without any such knowledge. We question very much if this aspect of the case will find acceptance with legislators. The law, for obvious reasons, makes it impossible for a man who has not had a special training, and obtained a certificate, to dispense to the public various strong poisons. The danger of an unqualified person undertaking such work is very great, but the danger of a wrong pair of spectacles being prescribed is not one which is likely to appeal to Members of Parliament as requiring legal interference.

In view of the controversy which is at present going on, and which is likely to become more acute, it is to be regretted that there is no British diploma or degree giving to its holder a qualification in ophthalmic medicine and surgery. The ophthalmic surgeon may well say to the spectacle vendor that he is not qualified, but at present it is equally open to the spectacle vendor to say, "No more are you, in so far as you have got no special diploma of competency in ophthalmic work."

We do not wish to be misunderstood on the point. The present system has produced men in the department of ophthalmology of first-rate standing. We hope that in the main they are quite equal to any to be found in other branches of special practice. We venture to think, however, that ophthalmology is now the most advanced of all the specialties, and just as a register, separate from the General Medical Register, is kept for dentists who have taken out certain courses of instruction and passed examinations, so we think there should be a special diploma and register for fully trained ophthalmic surgeons.

Ophthalmology cannot now be regarded merely as a branch of Surgery. A great deal of it no doubt involves a thorough knowledge of surgical handicraft, and above all of the most recent surgical pathology, but in other phases, ophthalmic work is much more closely connected with the physical sciences, and our experience shows that it is just in this direction that, in a few instances, the present system has failed.

Some years ago we called attention to this subject in a paper in the *British Medical Journal*,\* in which we attempted to sketch a course of instruction for those intended for ophthalmic work.

In that article we pointed out the difference which we thought should be made between the present curriculum of the ordinary medical student and that of the man intending to be an ophthalmic practitioner. Even in the preliminary examination a difference should be made. An ophthalmic student should certainly have a thorough knowledge of plane trigonometry, and also should have some

\* "British Medical Journal," April 27th, 1901.

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idea of the elements of the calculus. Were this required, we would hear less in ophthalmic text-books of distances being greater than infinity; nor would it be possible to find the well-known formula for the range of accommodation in emmetropia written :—

$$A = P - \infty = P$$

As regards strictly professional education, an extensive course of physics should be required, with probably two years of laboratory training. In the same manner, those parts of physiology which have special reference to vision should receive adequate attention. The training in medicine and surgery should be quite as extensive as for a student who intends to take up medical practice, and ample clinical work should be insisted on. I would exempt the ophthalmic student from studying insanity, but would see to it that he knew something of neurology. Pathology should receive a prominent place in an oculist's training. He should attend both a general and a special course, and should have an intimate acquaintance with the methods of bacteriological investigations. Unquestionably sound treatment depends upon sound pathological conceptions.

His ophthalmic studies should include instruction on (*a*) external diseases, (*b*) fundus conditions, (*c*) operative work, (*d*) errors of refraction, (*e*) muscular defects, (*f*) perimetric examinations.

It is sometimes anomalous that an ophthalmic practitioner should, in his student days, have been compelled to attend a course of instruction on midwifery and gynaecology, but at the same time be allowed to escape altogether without a laboratory training on the use of such instruments as the spectroscope, the spectrometer prisms, and the spherometer. It is also an anomaly that at present to become an ophthalmic surgeon, a man must have

attended a course of lectures on jurisprudence, but that it is not necessary for him to know anything of plane trigonometry; although it must be admitted that without such knowledge he is quite unable to read text-books which are indispensable for his work.

We do not for a moment suggest that any medical practitioner should be prevented from practising ophthalmology if he wishes; all we advocate is that a man who has a thorough training in elementary mathematics, in the work of a physical laboratory, and in certain special branches of surgical pathology, should be entitled to have his name put upon a separate register. Were such an arrangement carried out we feel that it would enormously strengthen the position of ophthalmic surgeons in opposing the proposed legislation.

